

11627841 EMBASE No: 2002199981

Eccrine naevus: Case report and literature review [12]

Rodriguez Vazquez M.; Gomez de la Fuente E.; Alvarez Fernandez J.G.;  
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(154-156)

CODEN: ADVEA ISSN: 0001-5555

DOCUMENT TYPE: Journal ; Letter

LANGUAGE: ENGLISH

NUMBER OF REFERENCES: 17

BRAND NAME/MANUFACTURER NAME: **botox**/Allergan/United States

MANUFACTURER NAMES: Allergan/United States

DRUG DESCRIPTORS:

\***botulinum** toxin A--drug therapy--dt

aluminum chloride--drug therapy--dt

MEDICAL DESCRIPTORS:

\*nevus--diagnosis--di; \*nevus--drug therapy--dt; \*sweat gland tumor

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7.

Set Items Description

? e sunspots

Ref	Items	RT	Index-term
E1	4907	3	*SUNSPOTS
E2	1		SUNSPOTS AND PORES
E3	3		SUNSPOTS DATA
E4	1		SUNSPOTS LIFETIME
E5	1		SUNSPOTS NUMBERS
E6	1		SUNSPOTS ROTATION
E7	1		SUNSPOTS SOLAR IRRADIATION SOLAR DIAMETER VOLC
E8	1		SUNSPOTS, ACTIVITY
E9	1		SUNSPOTS, SUN
E10	1		SUNSPOTS, ULTRAVIOLET
E11	2		SUNSPOTTING
E12	1		SUNSPOTZONES

Enter P or PAGE for more

? e e1

Ref	Items	Type	RT	Index-term
R1	39		3	*SUNSPOTS
R2	804	X	18	SOLAR ACTIVITY

? e age spots

Ref	Items	Index-term
E1	1	AGE SPOT
E2	5	*AGE SPOTS
E3	1	AGE SPRAY RE IMMUNIZATION ANTIBODY TITER PROPH
E4	5	AGE SPREAD
E5	1	AGE STABILITY
E6	1	AGE STABILIZING EFFECTS

E7	1	AGE STAGE CONTRASTS
E8	1	AGE STAGE DIAGNOSIS CYTOLOGICAL SCREENING
E9	1	AGE STAGE RUNNER TUFT DEVELOPMENT
E10	1	AGE STAGE SOCIOECONOMIC STATUS EARLY DETECTION
E11	1	AGE STAGE SURVIVAL RATE
E12	1	AGE STAGE TUMOR BULK CHEMOTHERAPY PROGNOSIS

Enter P or PAGE for more

? s e1-e2

1	AGE SPOT
5	AGE SPOTS
6	E1-E2

S1

? e freckles

Ref	Items	RT	Index-term
E1	2		FRECKLELIKE
E2	1		FRECKLERS
E3	1704	3	*FRECKLES
E4	1		FRECKLES (EPHELIDES)
E5	1		FRECKLES BIRTHMARKS MOLES HUMAN EVOLUTION LETT
E6	1		FRECKLES, MULTICOMPONENT ALLOYS
E7	16		FRECKLETON
E8	1		FRECKLETON AND WATKINSON'S MODEL
E9	1		FRECKLETON G
E10	1127		FRECKLING
E11	1		FRECKLING DEGREE
E12	1		FRECKLING PHENOTYPE

Enter P or PAGE for more

? s e3-e5

1704	FRECKLES
1	FRECKLES (EPHELIDES)
1	FRECKLES BIRTHMARKS MOLES HUMAN EVOLUTION LETT
S2 1704	E3-E5

? e e3

Ref	Items	Type	RT	Index-term
R1	391		3	*FRECKLES
R2	3509	X	29	MELANOSIS

? s r1-r2

391	FRECKLES
3509	MELANOSIS
S3 3797	R1-R2

? e r2

Ref	Items	Type	RT	Index-term
R1	5153		38	*MELANOSIS
R2	14	U		MELANINS,METABOLIC DISORDERS, MELANOSIS
R3	506	U	2	MELANISM
R4	2385	X		DC=C17.800.621.430.530.
R5	152	X	3	CHLOASMA
R6	391	X	3	FRECKLES
R7	72	X	3	MELANISM
R8	256	X	3	MELASMA
R9	4274	B	20	HYPERPIGMENTATION
R10	1313	N	6	ACANTHOSIS NIGRICANS
R11	2412	N	14	LENTIGO
R12	17	N	30	LEOPARD SYNDROME

Enter P or PAGE for more

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Ref	Items	Type	RT	Index-term
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R13    1655    N    29    PEUTZ-JEGHERS SYNDROME
R14     271    E           DC=C2.810.690.10.540
R15      0    S     1    LESION, MELANOTIC
R16     33    S     1    MELANISM
R17      0    S     1    MELANOTIC DISEASE
R18      0    S     1    MELANOTIC LESION
R19    4570    B    23    HYPERPIGMENTATION
R20     20    N     4    LAUGIER HUNZIKER SYNDROME

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? p

>>>Related terms display completed...

? s r1-r20

>>>One or more prefixes are unsupported

>>> or undefined in one or more files.

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5153    MELANOSIS
14      MELANINS,METABOLIC DISORDERS, MELANOSIS
506     MELANISM
2385    DC=C17.800.621.430.530.
152     CHLOASMA
391     FRECKLES
72      MELANISM
256     MELASMA
4274    HYPERPIGMENTATION
1313    ACANTHOSIS NIGRICANS
2412    LENTIGO
17      LEOPARD SYNDROME
1655    PEUTZ-JEGHERS SYNDROME
271     DC=C2.810.690.10.540
0       LESION, MELANOTIC
33      MELANISM
0       MELANOTIC DISEASE
0       MELANOTIC LESION
4570    HYPERPIGMENTATION
20      LAUGIER HUNZIKER SYNDROME
S4      19502    R1-R20

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? ds

Set	Items	Description
S1	6	E1-E2
S2	1704	E3-E5
S3	3797	R1-R2
S4	19502	R1-R20

? s s1 or s2 or s3 or s4

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6      S1
1704   S2
3797   S3
19502  S4
S5     20789    S1 OR S2 OR S3 OR S4

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? s botox? or botulinum? or botulin? or btx or bta or botn? or neurotoxin?

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4468    BOTOX?
55434   BOTULINUM?
56886   BOTULIN?
6176    BTX
3282    BTA
807     BOTN?
101927  NEUROTOXIN?
S6      155953  BOTOX? OR BOTULINUM? OR BOTULIN? OR BTX OR BTA OR BOTN?
OR NEUROTOXIN?

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? s s5 and s6

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20789   S5
155953  S6
S7      32     S5 AND S6

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? s s7/2005

>>>Year ranges not supported in one or more files

32 S7  
2016355 PY=2005  
S8 7 S7/2005  
? s s7 not s8  
32 S7  
7 S8  
S9 25 S7 NOT S8  
? rd  
...completed examining records  
S10 23 RD (unique items)

10/9/1 (Item 1 from file: 155)  
DIALOG(R)File 155:MEDLINE(R)  
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15286322 PMID: 15071127

Clinical practice. Treatment of photoaging.  
Stern Robert S  
Department of Dermatology, Beth Israel Deaconess Medical Center and  
Harvard Medical School, Boston, MA 02215, USA. rstern@bidmc.harvard.edu  
New England journal of medicine (United States) Apr 8 2004, 350 (15)  
p1526-34, ISSN 1533-4406 Journal Code: 0255562  
Publishing Model Print; Comment in N Engl J Med. 2004 Aug 5;351(6) 614-5;  
author reply 614-5; Comment in PMID 15295060  
Document type: Journal Article; Review; Review, Tutorial  
Languages: ENGLISH  
Main Citation Owner: NLM  
Record type: MEDLINE; Completed  
Subfile: AIM; INDEX MEDICUS  
(58 Refs.)  
Tags: Female  
Descriptors: \*Cosmetic Techniques; \*Skin Aging; Botulinum Toxins  
--therapeutic use--TU; Dermatologic Agents--therapeutic use--TU; Humans;  
Lasers--therapeutic use--TU; Lentigo--therapy--TH; Middle Aged;  
Practice Guidelines; Skin--anatomy and histology--AH; Skin--pathology--PA;  
Skin Aging--pathology--PA; Sunscreening Agents--therapeutic use--TU;  
Telangiectasis--surgery--SU  
CAS Registry No.: 0 (Botulinum Toxins); 0 (Dermatologic Agents); 0  
(Sunscreening Agents)  
Record Date Created: 20040408  
Record Date Completed: 20040423

10/9/2 (Item 2 from file: 155)  
DIALOG(R)File 155:MEDLINE(R)  
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11014777 PMID: 7793763

[A case of unilateral elastosis with cysts and comedones. Favre-Racouchot syndrome]  
Un cas unilateral d'elastose avec kystes et comedons de Favre et Racouchot.

Moulin G; Thomas L; Vigneau M; Fiere A  
Service de Dermatologie, Hopital de l'Antiquaille, Lyon.  
Annales de dermatologie et de venerologie (FRANCE) 1994, 121 (10)  
p721-3, ISSN 0151-9638 Journal Code: 7702013  
Publishing Model Print  
Document type: Case Reports; Journal Article ; English Abstract  
Languages: FRENCH  
Main Citation Owner: NLM  
Record type: MEDLINE; Completed  
Subfile: INDEX MEDICUS; NURSING

INTRODUCTION. Cutaneous elastosis with cysts and comedones (Favre-Racouchot) is one of the oldest known manifestations of helioderma. Both sides of the face are usually involved symmetrically. CASE REPORT. We observed a 65-year-old woman with extremely severe Favre-Racouchot disease localized exclusively on the left side of the face. The diagnosis of elastosis with cysts and comedones was confirmed histologically. This elastosis with cysts and comedones was associated with spasms of the hemiface treated with injections of \*\*\*botulinic\*\*\* toxin. This association was fortuitous and we retained actinic irradiation as the causal agent in this woman who had worked for 15 years in the same room. The elastosis occurred on the side of the face which had been continuously exposed at the same orientation to the window. COMMENTS. This original observation is

similar to cases where facial exposure to artificial light or sunlight is asymmetrical, leading to a higher incidence of lesions on one side of the face: colloid milium, actinic keratosis; Dubreuilh melanoma (malignant \*\*\*lentigo\*\*\* ) or simple helioderma. The asymmetrical nature of the actinic lesions is often related to automobile driving. This case was particular since it demonstrated that Favre-Racouchot elastosis with cysts and comedones is due to actinic irradiation and not to skin aging.

Tags: Female

Descriptors: \*Facial Dermatoses--diagnosis--DI; \*Sunlight --adverse effects--AE; Acne Vulgaris--complications--CO; Aged; Elastic Tissue --pathology--PA; Epidermal Cyst--diagnosis--DI; Facial Dermatoses--etiology --ET; Facial Muscles; Humans; Spasm--etiology--ET

Record Date Created: 19950725

Record Date Completed: 19950725

10/9/3 (Item 3 from file: 155)

DIALOG(R)File 155:MEDLINE(R)

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08717289 PMID: 2772605

[Neurotoxic syndrome of sheep due to the ingestion of plants of the Mediterranean scrub: clinical, histopathological, histochemical and ultrastructural observations]

Sindrome neurotossica da ingestione di piante della 'macchia mediterranea' nell'ovino: osservazioni cliniche, istopatologiche, istochimiche ed ultrastrutturali.

Leoni A; Nieddu A M; Guarda F; Castagnaro M; Firinu A; Cossu P; Mingioni V

Schweizer Archiv fur Tierheilkunde (SWITZERLAND) 1989, 131 (6) p361-8, ISSN 0036-7281 Journal Code: 0424247

Publishing Model Print

Document type: Journal Article ; English Abstract

Languages: ITALIAN

Main Citation Owner: NLM

Record type: MEDLINE; Completed

Subfile: INDEX MEDICUS

A severe neurological disorder was observed during a very dry season, in sheep pasturing on land with mediterranean vegetation. During the crisis, lasting 5-20", ataxia and convulsions were the main clinical signs. Brain congestion, spongy appearance of the liver, interstitial nephritis and **hyperpigmentation** of visceral lymph nodes were the most important macroscopic lesions. Histopathological, histochemical and ultrastructural findings confirmed liver and kidney lesions and showed considerable neurovisceral storage of lipofuscin. Although further toxicological and experimental studies are needed to elucidate the origin of the disease, the Authors attribute the outbreak of the neurological syndrome to the ingestion of a \*\*\*neurotoxin\*\*\* containing plant.

Descriptors: \*Nervous System Diseases--veterinary--VE; \*Plant Poisoning --veterinary--VE; \*Sheep Diseases--etiology--ET; Animals; Nervous System Diseases--etiology--ET; Plant Poisoning--etiology--ET; Sheep; Syndrome --veterinary--VE

Record Date Created: 19891010

Record Date Completed: 19891010

10/9/4 (Item 1 from file: 73)

DIALOG(R)File 73:EMBASE

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13178068 EMBASE No: 2005221672

Novel opportunities in the treatment and prevention of scarring

Berman B.; Villa A.M.; Ramirez C.C.

Dr. B. Berman, Dept. Dermatol. and Cutaneous Surg., 1600 N.W. 10th  
Avenue, Miami, FL 33136 United States  
AUTHOR EMAIL: bberman@med.miami.edu  
Journal of Cutaneous Medicine and Surgery ( J. CUTANEOUS MED. SURG. ) ( United States) 2004, 8/SUPPL. 3 (32-36)  
CODEN: JCMSF ISSN: 1203-4754  
DOCUMENT TYPE: Journal ; Article  
LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH  
NUMBER OF REFERENCES: 54

Numerous treatments have been described for the treatment and prevention of scars, but the optimal management strategy is yet to be defined. In this article we present and evaluate new opportunities for the treatment and prevention of hypertrophic scars, keloids, and atrophic scars. Clinical, animal, and in vitro studies reporting novel techniques for the treatment and prevention of scarring were identified primarily from the MEDLINE/PubMed database. We found that a variety of new treatments exist with potential effectiveness for the treatment of hypertrophic scars and keloids, including interferon, imiquimod 5% cream, tacrolimus,

**\*\*\*botulinum\*\*\*** toxin, 5-fluorouracil, bleomycin, and verapamil. For atrophic scars, different types of lasers represent modern treatment modalities with satisfactory results. Several agents have been reported to be effective in reducing scarring in vitro and in animal studies, representing potential opportunities for scarring management. We conclude that several novel modalities may be potential therapies for scarring.

#### DRUG DESCRIPTORS:

gamma interferon--drug therapy--dt; alpha2b interferon--drug therapy--dt; alpha interferon--drug therapy--dt; imiquimod--drug toxicity--to; imiquimod--pharmacology--pd; imiquimod--topical drug administration--tp; tsukubaenolide--drug therapy--dt; tsukubaenolide--topical drug administration--tp; **botulinum** toxin A--drug therapy--dt; fluorouracil--adverse drug reaction--ae; fluorouracil--drug therapy--dt; fluorouracil--pharmacology--pd; bleomycin--adverse drug reaction--ae; bleomycin--clinical trial--ct; bleomycin--drug therapy--dt; bleomycin--pharmacology--pd; verapamil--clinical trial--ct; verapamil--drug therapy--dt; verapamil--pharmacology--pd; oligodeoxynucleotide phosphorothioate--drug therapy--dt; oligodeoxynucleotide phosphorothioate--pharmacology--pd; tumor necrosis factor alpha antibody--drug therapy--dt; tumor necrosis factor alpha antibody--pharmacology--pd; angiotensin derivative--drug therapy--dt; angiotensin derivative--pharmacology--pd; celecoxib--drug therapy--dt; celecoxib--pharmacology--pd; celecoxib--topical drug administration--tp; unclassified drug

#### MEDICAL DESCRIPTORS:

\*skin scar--drug therapy--dt; \*skin scar--prevention--pc; \*skin scar--therapy--th  
atopic dermatitis--drug therapy--dt; pulsed dye laser; hypertrophic scar--drug therapy--dt; hypertrophic scar--therapy--th; scar formation--drug therapy--dt; scar formation--prevention--pc; scar formation--therapy--th; thrombosis--complication--co; ischemia--complication--co; purpura--complication--co; pigment disorder--complication--co; keloid--drug therapy--dt; keloid--therapy--th; carbon dioxide laser; erbium YAG laser; **hyperpigmentation**--complication--co; infection--complication--co; skin burning sensation--side effect--si; skin atrophy--side effect--si; telangiectasia--side effect--si; skin necrosis--side effect--si; human; nonhuman; clinical trial; article; priority journal

DRUG TERMS (UNCONTROLLED): angiotensin[1-7][3 norleucine]--drug therapy--dt; angiotensin[1-7][3 norleucine]--pharmacology--pd

CAS REGISTRY NO.: 82115-62-6 (gamma interferon); 99210-65-8 (alpha2b interferon); 99011-02-6 (imiquimod); 104987-11-3 (tsukubaenolide); 93384-43-1 (**botulinum** toxin A); 51-21-8 (fluorouracil); 11056-06-7 (bleomycin); 152-11-4, 52-53-9 (verapamil); 169590-42-5 (celecoxib)



SECTION HEADINGS:

013 Dermatology and Venereology  
037 Drug Literature Index  
038 Adverse Reaction Titles

10/9/5 (Item 2 from file: 73)  
DIALOG(R)File 73:EMBASE  
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12987298 EMBASE No: 2005046923

Therapeutic procedures for rejuvenation of the lip and its periphery  
Sato K.; Yoshimura K.  
Dr. K. Sato, Department of Plastic Surgery, Graduate School of Medicine,  
University of Tokyo, Tokyo 113-8655 Japan  
Japanese Journal of Plastic and Reconstructive Surgery ( JPN. J. PLAST.  
RECONSTR. SURG. ) (Japan) 2004, 47/12 (1339-1345)  
CODEN: KEGEA ISSN: 0021-5228  
DOCUMENT TYPE: Journal ; Article  
LANGUAGE: JAPANESE SUMMARY LANGUAGE: ENGLISH; JAPANESE  
NUMBER OF REFERENCES: 17

Many therapeutic procedures are becoming popular for lip and peripheral rejuvenation. Injectable materials, such as collagens and hyaluronic acid gels, are effective for correcting the rhytides, but diminish over time. Artificial materials can be an option used for upper lip and nasolabial sulcus eversion. Chemical peeling and non-ablative laser resurfacing can improve irregularities of the lip skin. Ablative laser resurfacing is appropriate for rhytides that resist other therapies. \*\*\*Botulinum\*\*\* toxin type A smooths hyperfunctional lines of the lip. Vbeam(R) laser has the efficacy of the clinically proven pulsed dye laser coupled with an integrated dynamic cooling device that minimizes subsequent erythema and post-inflammatory \*\*\*hyperpigmentation\*\*\*. Finally, autologous fat transfer can be performed for augmentation of the vermillion or the nasolabial sulcus, but its effectiveness depends on the survival of injected adipocytes.

DEVICE BRAND NAME/MANUFACTURER NAME: Vbeam laser

DRUG DESCRIPTORS:

\*collagen--drug therapy--dt; \*hyaluronic acid--drug therapy--dt; \*  
**botulinum** toxin A--drug therapy--dt

MEDICAL DESCRIPTORS:

\*rejuvenation; \*lip disease--drug therapy--dt; \*lip disease--therapy--th  
wrinkle; skin abrasion; laser; pulsed dye laser; cooling; erythema;

**hyperpigmentation**; cell survival; adipocyte; human; article

CAS REGISTRY NO.: 9007-34-5 (collagen); 31799-91-4, 9004-61-9, 9067-32-7 (  
hyaluronic acid); 93384-43-1 (**botulinum** toxin A)

SECTION HEADINGS:

009 Surgery  
013 Dermatology and Venereology  
027 Biophysics, Bioengineering and Medical Instrumentation  
037 Drug Literature Index

10/9/6 (Item 3 from file: 73)  
DIALOG(R)File 73:EMBASE  
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12597695 EMBASE No: 2004199896

A brief overview of noninvasive lasers in cosmetic maxillofacial surgery  
Boyden D.K.  
D.K. Boyden, Olympic Surgical Associates, 450 South Kitsap Boulevard,  
Port Orchard, WA 98366 United States

AUTHOR EMAIL: drboyden@olympicsurgical.com  
Oral and Maxillofacial Surgery Clinics of North America ( ORAL  
MAXILLOFAC. SURG. CLIN. NORTH AM. ) (United States) 2004, 16/2  
(231-237)  
CODEN: OMSCA ISSN: 1042-3699  
PUBLISHER ITEM IDENTIFIER: S1042369904000330  
DOCUMENT TYPE: Journal ; Review  
LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH  
NUMBER OF REFERENCES: 12

As patients become more aware of their options related to facial enhancement, nonsurgical offerings will become an ever larger component of the cosmetic practice. Patients will continue to demand rejuvenating options but will desire a minimum of downtime, discomfort, and invasiveness. The use of traditional skin care approaches such as microdermabrasion, **botulinum** toxin, injectable fillers, and prescription-grade skin care products will be accentuated by the advances in laser and IPL technology. Using these new technologies effectively, knowledgeably, and safely is crucial for the maxillofacial surgeon to maintain the leading role in facial cosmetic surgery. Currently, dozens of lasers exist for noninvasive cosmetic procedures. This wide range of options, with each option having its own claims of efficacy, superiority, and ease of use, is beyond this review. The reader is encouraged to investigate thoroughly any claims, studies, or promises made by any manufacturer. It is wise to test any equipment in the clinic for as long as possible before purchase. A number of the lasers mentioned in this review are those with which the author has had significant experience. Their inclusion is not an endorsement of any individual type of laser or manufacturer. These technologies are not inexpensive to acquire; a complete understanding of the laser's physics, personnel required, and necessary ancillary supplies is mandatory. In addition, local, state, or regional rules and regulations may impact the use of laser technology in any given practice. The noninvasive laser and IPL cosmetic procedures covered in this article are only a few of the uses for lasers in cosmetic maxillofacial surgery. These procedures are part of an overall practice philosophy of which skin care and maintenance is a vital component. In conjunction with prescription skin care products, **botulinum** toxin, microderma brasion, injectable fillers, and so forth, these laser procedures provide a comprehensive menu of services for contemporary maxillofacial surgery practices. (c) 2004 Elsevier Inc. All rights reserved.

DRUG DESCRIPTORS:

filler; **botulinum** toxin; dermatological agent; steroid--drug therapy  
--dt; steroid--intralesional drug administration--il

MEDICAL DESCRIPTORS:

\*low level laser therapy; \*esthetic surgery; \*maxillofacial surgery; \*skin  
disease--drug therapy--dt; \*skin disease--therapy--th  
skin abrasion; prescription; surgeon; risk benefit analysis; physics;  
clinical practice; skin care; tissue reaction; wrinkle;  
**hyperpigmentation**--therapy--th; neodymium laser; scar formation--drug  
therapy--dt; scar formation--therapy--th; hirsutism--therapy--th; pulsed  
dye laser; nevus flammeus--therapy--th; skin hemangioma--therapy--th;  
telangiectasia--therapy--th; human; review

SECTION HEADINGS:

- 009 Surgery
- 013 Dermatology and Venereology
- 027 Biophysics, Bioengineering and Medical Instrumentation
- 037 Drug Literature Index

12579145 EMBASE No: 2004165970

Treatment of Photoaging

Stern R.S.

Dr. R.S. Stern, Department of Dermatology, Beth Israel Deaconess Medical Center, 330 Brookline Ave., Boston, MA 02215 United States

AUTHOR EMAIL: rstern@bidmc.harvard.edu

New England Journal of Medicine ( NEW ENGL. J. MED. ) (United States)

08 APR 2004, 350/15 (1526-1534)

CODEN: NEJMA ISSN: 0028-4793

DOCUMENT TYPE: Journal ; Article

LANGUAGE: ENGLISH

NUMBER OF REFERENCES: 60

DEVICE BRAND NAME/MANUFACTURER NAME: Zyplast; Restylane

DRUG DESCRIPTORS:

sunscreen--adverse drug reaction--ae; sunscreen--clinical trial--ct;  
sunscreen--drug combination--cb; sunscreen--drug comparison--cm; sunscreen  
--drug therapy--dt; sunscreen--pharmacology--pd; sunscreen--topical drug  
administration--tp; hydroxyacid--adverse drug reaction--ae; hydroxyacid  
--clinical trial--ct; hydroxyacid--drug combination--cb; hydroxyacid--drug  
therapy--dt; hydroxyacid--pharmacoeconomics--pe; hydroxyacid--pharmacology  
--pd; hydroxyacid--topical drug administration--tp; retinoid--adverse drug  
reaction--ae; retinoid--clinical trial--ct; retinoid--drug combination--cb;  
retinoid--drug comparison--cm; retinoid--drug therapy--dt; retinoid  
--pharmacoeconomics--pe; retinoid--pharmacology--pd; retinoid--topical drug  
administration--tp; glycolic acid--clinical trial--ct; glycolic acid--drug  
therapy--dt; glycolic acid--pharmacology--pd; glycolic acid--topical drug  
administration--tp; lactic acid--clinical trial--ct; lactic acid--drug  
therapy--dt; lactic acid--pharmacology--pd; lactic acid--topical drug  
administration--tp; retinoic acid--drug therapy--dt; retinoic acid  
--pharmacology--pd; retinoic acid--topical drug administration--tp;  
tazarotene--drug therapy--dt; tazarotene--pharmacology--pd; tazarotene  
--topical drug administration--tp; emollient agent--clinical trial--ct;  
emollient agent--drug comparison--cm; emollient agent--drug therapy--dt;  
emollient agent--pharmacology--pd; retinol--drug therapy--dt; retinol  
--pharmacology--pd; retinol--topical drug administration--tp; retinal--drug  
therapy--dt; retinal--pharmacology--pd; retinal--topical drug  
administration--tp; fluorouracil--adverse drug reaction--ae; fluorouracil  
--drug comparison--cm; fluorouracil--drug therapy--dt; fluorouracil  
--pharmacology--pd; fluorouracil--topical drug administration--tp;  
aminolevulinic acid--drug comparison--cm; aminolevulinic acid--drug therapy  
--dt; aminolevulinic acid--pharmacology--pd; aminolevulinic acid--topical  
drug administration--tp; liquid nitrogen--drug therapy--dt; liquid nitrogen  
--pharmacology--pd; liquid nitrogen--topical drug administration--tp;  
diclofenac--adverse drug reaction--ae; diclofenac--drug comparison--cm;  
diclofenac--drug therapy--dt; diclofenac--pharmacology--pd; diclofenac  
--topical drug administration--tp; **botulinum** toxin--drug therapy--dt;  
**botulinum** toxin--pharmacology--pd; **botulinum** toxin A--drug  
therapy--dt; **botulinum** toxin A--pharmacology--pd; collagen;  
hyaluronic acid; filler; collagen implant; copper; beta carotene--drug  
therapy--dt; beta carotene--pharmacology--pd

MEDICAL DESCRIPTORS:

\*aging; \*skin disease--disease management--dm; \*skin disease--drug therapy  
--dt; \*skin disease--prevention--pc; \*skin disease--surgery--su; \*skin  
disease--therapy--th  
cutaneous parameters; wrinkle; **hyperpigmentation**--drug therapy--dt;  
skin manifestation--disease management--dm; skin manifestation--drug  
therapy--dt; skin manifestation--surgery--su; skin manifestation--therapy  
--th; face; skin cancer--etiology--et; skin cancer--prevention--pc; cancer  
risk; risk reduction; actinic keratosis--drug therapy--dt; actinic  
keratosis--therapy--th; squamous cell carcinoma--etiology--et; squamous  
cell carcinoma--prevention--pc; sun exposure; risk factor; smoking;  
ultraviolet B radiation; ultraviolet A radiation; treatment indication;

protective clothing; drug hypersensitivity--side effect--si; skin irritation--side effect--si; drug cost; cream; lotion; health insurance; disease course; skin carcinogenesis; cryosurgery; photodynamic therapy; laser surgery; rejuvenation; rhytidoplasty; eyelid reconstruction; health care cost; skin surgery; cattle; skin bruising--complication--co; pain --complication--co; skin abrasion; neodymium laser; erbium YAG laser; vapor ; argon laser; muscle hypertonia--therapy--th; lentigo--therapy--th; pigment disorder--surgery--su; pigment disorder--therapy--th; telangiectasia--surgery--su; angioma--surgery--su; human; nonhuman; clinical trial; article; priority journal  
MEDICAL TERMS (UNCONTROLLED): photoaging--disease management--dm; photoaging--drug therapy--dt; photoaging--surgery--su; photoaging--therapy --th

CAS REGISTRY NO.: 79-14-1 (glycolic acid); 113-21-3, 50-21-5 (lactic acid); 302-79-4 (retinoic acid); 118292-40-3 (tazarotene); 68-26-8, 82445-97-4 (retinol); 116-31-4 (retinal); 51-21-8 (fluorouracil); 106-60-5 (aminolevulinic acid); 15307-79-6, 15307-86-5 (diclofenac); 93384-43-1 (**botulinum** toxin A); 9007-34-5 (collagen); 31799-91-4, 9004-61-9, 9067-32-7 (hyaluronic acid); 15158-11-9, 7440-50-8 (copper); 7235-40-7 (beta carotene)

SECTION HEADINGS:

- 013 Dermatology and Venereology
- 027 Biophysics, Bioengineering and Medical Instrumentation
- 036 Health Policy, Economics and Management
- 037 Drug Literature Index
- 038 Adverse Reaction Titles

10/9/8 (Item 5 from file: 73)  
DIALOG(R)File 73:EMBASE  
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12577979 EMBASE No: 2004157900  
Incorporating Skin Care into a Facial Plastic Surgery Practice  
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Longmont, CO 80501 United States  
AUTHOR EMAIL: raj.terkonda@worldnet.att.net  
Facial Plastic Surgery ( FACIAL PLAST. SURG. ) (United States) 2004,  
20/1 (3-9)  
CODEN: FPSUE ISSN: 0736-6825  
DOCUMENT TYPE: Journal ; Review  
LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH  
NUMBER OF REFERENCES: 5

Starting a skin care practice takes patience and dedication, but it provides your patients with a necessary service for a comprehensive facial plastic and reconstructive surgery practice. This article discusses the differences between physician-directed skin care and spa-directed skin care and emphasizes procedures that may be performed by an aesthetician in a physician's office. Skin care practice can be classified into skin care regimens: chemical peels, microdermabrasion, and makeup. Optimal skin care regimens incorporate pharmaceutical-grade ingredients, including tretinoin, topical vitamin C, and hydroquinone. Microdermabrasion and superficial chemical peels, such as glycolic, salicylic, and trichloroacetic acid peels, are discussed. Noninvasive procedures by the physician, such as **Botox** and laser treatments, complement the procedures performed by the aesthetician. However, the physician is ultimately responsible for the philosophy of the skin care practice. Patient education, customer service, and skin health are key ingredients for success.

BRAND NAME/MANUFACTURER NAME: biomedic micropeel plus/Roche Posay/France;  
obagi nu derm/omp/United States

MANUFACTURER NAMES: Roche Posay/France; omp/United States; jane iredale  
mineral cosmetics/United States

DRUG DESCRIPTORS:

cosmetic; retinoic acid--drug administration--ad; retinoic acid--drug  
therapy--dt; retinoic acid--pharmacology--pd; retinoic acid--topical drug  
administration--tp; ascorbic acid--drug administration--ad; ascorbic acid  
--drug therapy--dt; ascorbic acid--pharmacology--pd; ascorbic acid--topical  
drug administration--tp; hydroquinone--drug administration--ad;  
hydroquinone--drug therapy--dt; hydroquinone--pharmacology--pd;  
hydroquinone--topical drug administration--tp; glycolic acid--adverse drug  
reaction--ae; glycolic acid--drug administration--ad; glycolic acid--drug  
therapy--dt; glycolic acid--pharmacology--pd; glycolic acid--topical drug  
administration--tp; salicylic acid derivative--adverse drug reaction--ae;  
salicylic acid derivative--drug administration--ad; salicylic acid  
derivative--drug therapy--dt; salicylic acid derivative--pharmacology--pd;  
salicylic acid derivative--topical drug administration--tp; trichloroacetic  
acid--drug administration--ad; trichloroacetic acid--drug therapy--dt;  
trichloroacetic acid--pharmacology--pd; trichloroacetic acid--topical drug  
administration--tp; **botulinum** toxin A--drug therapy--dt;  
**botulinum** toxin A--pharmacology--pd; resorcinol--adverse drug  
reaction--ae; 2 hydroxyacid--drug administration--ad; 2 hydroxyacid--drug  
therapy--dt; 2 hydroxyacid--pharmacology--pd; 2 hydroxyacid--topical drug  
administration--tp; sunscreen--drug administration--ad; sunscreen--drug  
therapy--dt; sunscreen--pharmacology--pd; sunscreen--topical drug  
administration--tp; adapalene--drug administration--ad; adapalene--drug  
therapy--dt; adapalene--pharmacology--pd; adapalene--topical drug  
administration--tp; antibiotic agent--drug administration--ad; antibiotic  
agent--drug therapy--dt; antibiotic agent--oral drug administration--po;  
antibiotic agent--topical drug administration--tp; unclassified drug

MEDICAL DESCRIPTORS:

\*skin care; \*plastic surgery; \*face surgery  
spa treatment; ambulatory surgery; skin abrasion; low level laser therapy;  
patient education; patient satisfaction; skin injury--side effect--si; drug  
toxicity--side effect--si; hyperventilation--side effect--si; nausea--side  
effect--si; vomiting--side effect--si; tinnitus--side effect--si; hearing  
loss--side effect--si; dizziness--side effect--si; acne--drug therapy--dt;  
cutaneous parameters; maintenance therapy; **hyperpigmentation**--drug  
therapy--dt; actinic keratosis--drug therapy--dt; skin sensitivity; rosacea  
--drug therapy--dt; erythema--side effect--si; human; review

DRUG TERMS (UNCONTROLLED): jessner peel--adverse drug reaction--ae; jessner  
peel--pharmacology--pd; obagi blue peel--pharmacology--pd; biomedic  
micropeel plus; obagi nu derm

MEDICAL TERMS (UNCONTROLLED): photoaging--drug therapy--dt

CAS REGISTRY NO.: 302-79-4 (retinoic acid); 134-03-2, 15421-15-5, 50-81-7 (  
ascorbic acid); 123-31-9 (hydroquinone); 79-14-1 (glycolic acid);  
14357-05-2, 76-03-9 (trichloroacetic acid); 93384-43-1 (**botulinum**  
toxin A); 108-46-3 (resorcinol); 106685-40-9 (adapalene)

SECTION HEADINGS:

- 009 Surgery
- 013 Dermatology and Venereology
- 037 Drug Literature Index
- 038 Adverse Reaction Titles

10/9/9 (Item 6 from file: 73)  
DIALOG(R) File 73:EMBASE  
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12516119 EMBASE No: 2004112272

A cosmetic approach to cutaneous defects

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PUBLISHER ITEM IDENTIFIER: S1061331503000386

DOCUMENT TYPE: Journal ; Review

LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH

NUMBER OF REFERENCES: 109

The options available to cosmetic surgeons for the treatment of the aging face are expanding at a rapid pace. Although any one modality may help, often a combination of approaches provides the most dramatic results. Whereas some of these techniques represent refinements of old tools, others represent entirely new modalities (Box 1). To tailor the most effective treatment plan appropriately, the limitations and strengths of these various tools must be understood by the patient and physician. During the preoperative consultation, assessment of a patient's expectations is critical when suggesting a treatment plan. By performing an assessment, the physician and patient can experience increased satisfaction because more optimal results are achieved. (c) 2004 Elsevier Inc. All rights reserved.

BRAND NAME/MANUFACTURER NAME: **botox**/Allergan/United States; myobloc/Elan/Ireland

MANUFACTURER NAMES: Allergan/United States; Elan/Ireland

DRUG DESCRIPTORS:

2 hydroxyacid--clinical trial--ct; 2 hydroxyacid--drug combination--cb; 2 hydroxyacid--drug dose--do; 2 hydroxyacid--drug therapy--dt; 2 hydroxyacid--pharmaceutics--pr; 2 hydroxyacid--pharmacology--pd; retinoid--adverse drug reaction--ae; retinoid--clinical trial--ct; retinoid--drug therapy--dt; retinoid--topical drug administration--tp; bleaching agent; antioxidant; **botulinum** toxin--adverse drug reaction--ae; **botulinum** toxin--drug dose--do; **botulinum** toxin--drug therapy--dt; **botulinum** toxin--pharmacology--pd; hydroquinone--drug combination--cb; hydroquinone--drug therapy--dt; hydroquinone--pharmaceutics--pr; hydroquinone--topical drug administration--tp; sunscreen; zinc oxide; titanium dioxide; oxybenzone; 4 aminobenzoic acid; 4 methoxycinnamic acid 2 ethylhexyl ester; retinoic acid--adverse drug reaction--ae; retinoic acid--clinical trial--ct; retinoic acid--drug combination--cb; retinoic acid--drug comparison--cm; retinoic acid--drug therapy--dt; retinoic acid--pharmaceutics--pr; retinoic acid--topical drug administration--tp; placebo; hyaluronic acid; tazarotene--adverse drug reaction--ae; tazarotene--clinical trial--ct; tazarotene--drug comparison--cm; tazarotene--drug dose--do; tazarotene--drug therapy--dt; azelaic acid--drug therapy--dt; kojic acid--drug therapy--dt; glycolic acid--clinical trial--ct; glycolic acid--drug combination--cb; glycolic acid--drug dose--do; glycolic acid--drug therapy--dt; glycolic acid--pharmaceutics--pr; dexamethasone--drug combination--cb; dexamethasone--drug therapy--dt; dexamethasone--pharmaceutics--pr; lactic acid--drug therapy--dt; ascorbic acid--clinical trial--ct; ascorbic acid--drug therapy--dt; alpha tocopherol--clinical trial--ct; alpha tocopherol--drug therapy--dt; estrogen--drug therapy--dt; **botulinum** toxin A--adverse drug reaction--ae; **botulinum** toxin A--drug therapy--dt; **botulinum** toxin A--pharmacology--pd; **botulinum** toxin B--drug dose--do; **botulinum** toxin B--drug therapy--dt; **botulinum** toxin B--pharmacology--pd; apraclonidine--drug therapy--dt; collagen implant; steroid--drug therapy--dt; steroid--intralesional drug administration--il; steroid--topical drug administration--tp; unindexed drug

MEDICAL DESCRIPTORS:

\*esthetic surgery; \*skin defect--drug therapy--dt; \*skin defect--etiology--et; \*skin defect--surgery--su; \*skin defect--therapy--th; rejuvenation; premature aging; surgical technique; preoperative evaluation; treatment planning; patient satisfaction; treatment outcome; low level laser therapy; wrinkle; cutaneous parameters; dermatitis--side effect--si;

skin discoloration--side effect--si; dry skin--side effect--si; skin abrasion--side effect--si; skin burning sensation--side effect--si; hyperpigmentation--drug therapy--dt; hyperpigmentation--etiology--et; drug formulation; ptosis--drug therapy--dt; ptosis--side effect--si; aging; human; clinical trial; review

CAS REGISTRY NO.: 123-31-9 (hydroquinone); 1314-13-2 (zinc oxide); 1317-70-0, 1317-80-2, 13463-67-7, 51745-87-0 (titanium dioxide); 131-57-7 (oxybenzone); 150-13-0 (4 aminobenzoic acid); 5466-77-3 (4 methoxycinnamic acid 2 ethylhexyl ester); 302-79-4 (retinoic acid); 31799-91-4, 9004-61-9, 9067-32-7 (hyaluronic acid); 118292-40-3 (tazarotene); 123-99-9 (azelaic acid); 501-30-4 (kojic acid); 79-14-1 (glycolic acid); 50-02-2 (dexamethasone); 113-21-3, 50-21-5 (lactic acid); 134-03-2, 15421-15-5, 50-81-7 (ascorbic acid); 1406-18-4, 1406-70-8, 52225-20-4, 58-95-7, 59-02-9 (alpha tocopherol); 93384-43-1 (botulinum toxin A); 66711-21-5 (apraclonidine)

SECTION HEADINGS:

- 013 Dermatology and Venereology
- 030 Clinical and Experimental Pharmacology
- 037 Drug Literature Index
- 038 Adverse Reaction Titles
- 039 Pharmacy

10/9/10 (Item 7 from file: 73)  
DIALOG(R) File 73: EMBASE  
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12413343 EMBASE No: 2004001421  
Cosmetic considerations and nonlaser cosmetic procedures in ethnic skin  
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Chicago, IL 60602 United States  
Dermatologic Clinics ( DERMATOL. CLIN. ) (United States) 2003, 21/4  
(703-712)  
CODEN: DRMCD ISSN: 0733-8635  
DOCUMENT TYPE: Journal ; Review  
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NUMBER OF REFERENCES: 72

The face of the aesthetic patient is changing to be more representative of the ethnic diversity of the United States population. It is imperative that the cosmetic dermatologic surgeon not only understand the concerns of the ethnic aesthetic patient but have an awareness of the unique needs of those with darker skin.

BRAND NAME/MANUFACTURER NAME: mederma/Merz/France; botox/Allergan/  
United States; myobloc/Elan/United States  
MANUFACTURER NAMES: Merz/France; Allergan/United States; Elan/United States  
DEVICE BRAND NAME/MANUFACTURER NAME: Avogel/Avocet Polymer Technologies/  
United States; Zyderm/Collagen Corporation/United States; Zyplast/Collagen  
Corporation/United States; Artecoll/Rofil/United States; Hyalaform Gel/  
Biomatrix/United States; Restylane/Q Med/Sweden; Nokor/Becton Dickinson/  
United States; Steristrips/3M/United States; Dermabond/Ethicon/United  
States; Dermologen/Collagenesis/United States; Alloderm/Lifecell/United  
States; Cymetra/Lifecell/United States; Facian/Medical Aesthetics/United  
States  
DEVICE MANUFACTURER NAMES: Avocet Polymer Technologies/United States;  
Collagen Corporation/United States; Rofil/United States; Biomatrix/United  
States; Q Med/Sweden; Becton Dickinson/United States; 3M/United States;  
Ethicon/United States; Collagenesis/United States; Lifecell/United States;  
Medical Aesthetics/United States  
DRUG DESCRIPTORS:  
\*collagen implant; \*collagen--topical drug administration--tp; \*retinol

--topical drug administration--tp; \***botulinum** toxin A--drug administration--ad; \***botulinum** toxin A--drug comparison--cm; \***botulinum** toxin A--pharmaceutics--pr; \***botulinum** toxin A--pharmacology--pd; \***botulinum** toxin A--intramuscular drug administration--im; \***botulinum** toxin B--drug administration--ad; \***botulinum** toxin B--drug comparison--cm; \***botulinum** toxin B--pharmaceutics--pr; \***botulinum** toxin B--pharmacology--pd; \***botulinum** toxin B--intramuscular drug administration--im silicone gel; plant extract; onion extract; poly(methyl methacrylate); hyaluronic acid derivative; 2 hydroxyacid--topical drug administration--tp; antioxidant--topical drug administration--tp; ascorbic acid--topical drug administration--tp; alpha tocopherol--topical drug administration--tp; ubiquinone--topical drug administration--tp; thioctic acid--oral drug administration--po; thioctic acid--topical drug administration--tp; unclassified drug

MEDICAL DESCRIPTORS:

\*ethnic group; \*scar--complication--co; \*scar--surgery--su; \*scar--therapy--th; \*keloid--complication--co; \*keloid--surgery--su; \*keloid--therapy--th; \*hypertrophic scar--complication--co; \*hypertrophic scar--surgery--su; \*hypertrophic scar--therapy--th

physical attractiveness; cultural factor; preoperative evaluation; **hyperpigmentation**; chloasma; acne; scar formation; aging; rejuvenation; liposuction; skin surgery; skin graft; implant; body image; adjuvant therapy; hydrogel; human; review; priority journal

DRUG TERMS (UNCONTROLLED): beta hydroxyacid--topical drug administration--tp; mederma

MEDICAL TERMS (UNCONTROLLED): dyschromia

CAS REGISTRY NO.: 9007-34-5 (collagen); 68-26-8, 82445-97-4 (retinol); 93384-43-1 (**botulinum** toxin A); 8054-39-5 (onion extract); 39320-98-4, 9008-29-1 (poly(methyl methacrylate)); 134-03-2, 15421-15-5, 50-81-7 (ascorbic acid); 1406-18-4, 1406-70-8, 52225-20-4, 58-95-7, 59-02-9 (alpha tocopherol); 1339-63-5 (ubiquinone); 1077-29-8, 1200-22-2, 2319-84-8, 62-46-4 (thioctic acid)

SECTION HEADINGS:

009 Surgery  
013 Dermatology and Venereology  
030 Clinical and Experimental Pharmacology  
037 Drug Literature Index  
039 Pharmacy

10/9/11 (Item 8 from file: 73)

DIALOG(R)File 73:EMBASE

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12361672 EMBASE No: 2003477854

Intense Pulsed Light(TM) and **Botulinum** Toxin Type A for the Aging Face

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Cosmetic Dermatology ( COSMET. DERMATOL. ) (United States) 2003, 16/11 SUPPL. (2-16)

CODEN: CDOEB ISSN: 1041-3766

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NUMBER OF REFERENCES: 41

Aged skin is the result of the combined processes of intrinsic aging and photoaging. Intrinsic aging is a cellular process that involves the accumulation of chronological genetic changes. Little is understood about how to combat intrinsic aging. Photoaging involves environmental effects, mainly damage from the sun, that can be reduced through a variety of



interventions. Several options exist for improving the appearance of aging skin. We present information about the use of nonablative intense pulsed light technology in addition to **botulinum** toxin type A for eradication of the signs of photoaged skin. A structured clinical approach is outlined.

BRAND NAME/MANUFACTURER NAME: aspirin; **botox**; dysport; myobloc; neurobloc

DEVICE BRAND NAME/MANUFACTURER NAME: Intense Pulsed Light/Lumenis; Lumenis One/Lumenis; VascuLight/Lumenis; LightSheer

DEVICE MANUFACTURER NAMES: Lumenis

DRUG DESCRIPTORS:

\***botulinum** toxin A--adverse drug reaction--ae; \***botulinum** toxin A--drug combination--cb; \***botulinum** toxin A--drug comparison--cm; \***botulinum** toxin A--drug interaction--it; \***botulinum** toxin A--drug therapy--dt; \***botulinum** toxin A--pharmacology--pd; carbon dioxide; erbium; anticoagulant agent--adverse drug reaction--ae; anticoagulant agent--drug combination--cb; anticoagulant agent--drug interaction--it; photosensitizing agent; isotretinoin; nonsteroid antiinflammatory agent--adverse drug reaction--ae; nonsteroid antiinflammatory agent--drug combination--cb; nonsteroid antiinflammatory agent--drug interaction--it; acetylsalicylic acid--adverse drug reaction--ae; acetylsalicylic acid--drug combination--cb; acetylsalicylic acid--drug interaction--it; alpha tocopherol--adverse drug reaction--ae; alpha tocopherol--drug combination--cb; alpha tocopherol--drug interaction--it; warfarin--adverse drug reaction--ae; warfarin--drug combination--cb; warfarin--drug interaction--it; herbaceous agent; antithrombocytic agent; sunscreen; cosmetic; ascorbic acid--drug combination--cb; retinol; Aloe vera extract--drug therapy--dt; Aloe vera extract--pharmacology--pd; Aloe vera extract--topical drug administration--tp; hydrocortisone--drug therapy--dt; hydrocortisone--pharmacology--pd; hydrocortisone--topical drug administration--tp; **botulinum** toxin B--drug comparison--cm; **botulinum** toxin B--pharmacology--pd; **botulinum** toxin--drug comparison--cm; **botulinum** toxin--drug therapy--dt; **botulinum** toxin--pharmacology--pd; aminoglycoside--drug combination--cb; aminoglycoside--drug interaction--it; lidocaine--topical drug administration--tp; neutralizing antibody--endogenous compound--ec

MEDICAL DESCRIPTORS:

\*aging; \*face; \*light exposure; \*phototherapy; genetics; environmental factor; sun exposure; cutaneous parameters; social psychology; rejuvenation; ultraviolet radiation; esthetics; carbon dioxide laser; erbium YAG laser; device; telangiectasia--therapy--th; nevus flammeus--therapy--th; hemangioma--therapy--th; rosacea--therapy--th; poikiloderma--therapy--th; skin hemangioma--therapy--th; tattoo--therapy--th; skin pigmentation; lentigo--therapy--th; **hyperpigmentation**--therapy--th; chloasma--therapy--th; scar--therapy--th; stria--therapy--th; treatment planning; patient selection; classification; rating scale; treatment contraindication; burn--complication--co; burn--drug therapy--dt; topical anesthesia; erythema--complication--co; erythema--drug therapy--dt; erythema--side effect--si; erythema--therapy--th; skin edema--complication--co; skin edema--drug therapy--dt; skin edema--side effect--si; skin edema--therapy--th; purpura--complication--co; strabismus--drug therapy--dt; strabismus--side effect--si; drug mechanism; blepharospasm--drug therapy--dt; facial nerve disease--drug therapy--dt; dystonia--drug therapy--dt; nystagmus--drug therapy--dt; neurologic disease--drug therapy--dt; skin bruising--side effect--si; headache--side effect--si; injection site; skin tingling--side effect--si; muscle weakness--side effect--si; ptosis--side effect--si; face asymmetry; immunogenicity; treatment outcome; human; clinical trial; review

CAS REGISTRY NO.: 93384-43-1 ( \*\*\***botulinum**\*\*\* toxin A); 124-38-9, 58561-67-4 (carbon dioxide); 7440-52-0 (erbium); 4759-48-2 ( isotretinoin); 493-53-8, 50-78-2, 53663-74-4, 53664-49-6, 63781-77-1 ( acetylsalicylic acid); 1406-18-4, 1406-70-8, 52225-20-4, 58-95-7,

59-02-9 (alpha tocopherol); 129-06-6, 2610-86-8, 3324-63-8, 5543-58-8,  
81-81-2 (warfarin); 134-03-2, 15421-15-5, 50-81-7 (ascorbic acid);  
68-26-8, 82445-97-4 (retinol); 50-23-7 (hydrocortisone); 137-58-6,  
24847-67-4, 56934-02-2, 73-78-9 (lidocaine)

SECTION HEADINGS:

008 Neurology and Neurosurgery  
013 Dermatology and Venereology  
027 Biophysics, Bioengineering and Medical Instrumentation  
037 Drug Literature Index  
038 Adverse Reaction Titles

10/9/12 (Item 9 from file: 73)

DIALOG(R)File 73:EMBASE

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12287763 EMBASE No: 2003394055

Current concepts: Chronic constipation

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New England Journal of Medicine ( NEW ENGL. J. MED. ) (United States)

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CODEN: NEJMA ISSN: 0028-4793

DOCUMENT TYPE: Journal ; Review

LANGUAGE: ENGLISH

NUMBER OF REFERENCES: 57

BRAND NAME/MANUFACTURER NAME: colsalide; cytotec; propulsid; zelnorm;  
urecholine

DRUG DESCRIPTORS:

prokinetic agent--drug therapy--dt; laxative--adverse drug reaction--ae;  
laxative--drug therapy--dt; **botulinum** toxin A--drug therapy--dt;  
anthraquinone--adverse drug reaction--ae; tegaserod--drug therapy--dt;  
tegaserod--pharmacology--pd; cisapride--adverse drug reaction--ae;  
cisapride--pharmacology--pd; fleet enema; glycerol; bisacodyl; bethanechol;  
misoprostol

MEDICAL DESCRIPTORS:

\*constipation--diagnosis--di; \*constipation--drug therapy--dt; \*  
constipation--etiology--et; \*constipation--surgery--su; \*constipation  
--therapy--th; \*chronic disease  
pathophysiology; symptomatology; intestine transit time; defecation;  
anorectal pressure; colon resection; medical examination; diagnostic test;  
defecography; feedback system; diet therapy; abdominal cramp--side effect  
--si; heart arrhythmia--side effect--si; electrolyte disturbance--side  
effect--si; hyperphosphatemia--side effect--si; **melanosis**--side  
effect--si; human; review; priority journal

DRUG TERMS (UNCONTROLLED): colsalide

CAS REGISTRY NO.: 93384-43-1 ( \*\*\*botulinum\*\*\* toxin A); 84-65-1 (  
anthraquinone); 145158-71-0, 189188-57-6 (tegaserod); 81098-60-4 (  
cisapride); 56-81-5 (glycerol); 603-50-9 (bisacodyl); 590-63-6,  
674-38-4, 91609-06-2 (bethanechol); 59122-46-2, 59122-48-4 (misoprostol)

SECTION HEADINGS:

006 Internal Medicine  
037 Drug Literature Index  
038 Adverse Reaction Titles  
048 Gastroenterology

10/9/13 (Item 10 from file: 73)

DIALOG(R)File 73:EMBASE

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12229188 EMBASE No: 2003343433

Easy phytic solution: A new alpha hydroxy acid peel with slow release and without neutralization

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, (45-51)

; Short Survey

LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH

NUMBER OF REFERENCES: 8

Alpha hydroxy acetic acids (AHAs) are safe, nontoxic, nonmelanotoxic, and easy to apply. AHAs should be neutralized with a basic solution when it reaches the proper depth, after redness appears but before frosting. Easy Phytic Peel does not need neutralization after application. It allows progressive and sequential actuation of its acid and is nonaggressive. The peel can be repeated until the desired results are obtained.

BRAND NAME/MANUFACTURER NAME: easy phytic peel/Skin Rebirth/Spain; easy tca/Skin Rebirth/Spain; unideep/Skin Rebirth/Spain; renutriv/Skin Rebirth/Spain; only touch/Skin Rebirth/Spain

MANUFACTURER NAMES: Skin Rebirth/Spain

DRUG DESCRIPTORS:

\*acetic acid derivative--drug therapy--dt; \*acetic acid derivative--pharmacology--pd; \*acetic acid derivative--drug combination--cb; \*acetic acid derivative--pharmacokinetics--pk; \*acetic acid derivative--topical drug administration--tp; \*acetic acid derivative--adverse drug reaction--ae; glycolic acid--drug therapy--dt; malic acid; lactic acid; tartaric acid; citric acid; mandelic acid; **botulinum** toxin--drug therapy--dt; **botulinum** toxin--drug combination--cb; phytic acid--pharmacology--pd; phytic acid--pharmacokinetics--pk; phytic acid--drug therapy--dt; alpha tocopherol; prasterone--drug therapy--dt; prasterone--topical drug administration--tp; unclassified drug

MEDICAL DESCRIPTORS:

human; slow drug release; drug toxicity--side effect--si; depigmentation; **melanosis**--side effect--si; drug safety; ichthyosis--drug therapy--dt; keratoderma--drug therapy--dt; drug effect; pH; acid base balance; acne--drug therapy--dt; drug penetration; antioxidant activity; aging; skin defect--drug therapy--dt; drug hypersensitivity--side effect--si; pruritus--side effect--si; skin inflammation--side effect--si; pigment disorder--drug therapy--dt; drug efficacy; short survey

DRUG TERMS (UNCONTROLLED): alpha hydroxyacetic acid derivative--drug therapy--dt; alpha hydroxyacetic acid derivative--pharmacology--pd; alpha hydroxyacetic acid derivative--drug combination--cb; alpha hydroxyacetic acid derivative--pharmacokinetics--pk; alpha hydroxyacetic acid derivative--topical drug administration--tp; alpha hydroxyacetic acid derivative--adverse drug reaction--ae; easy phytic peel--drug therapy--dt; easy phytic peel--pharmacokinetics--pk; easy phytic peel--pharmacology--pd; easy phytic peel--topical drug administration--tp; easy phytic peel--adverse drug reaction--ae; easy tca; unideep; renutriv; only touch

CAS REGISTRY NO.: 79-14-1 (glycolic acid); 149-61-1, 6915-15-7 (malic acid); 113-21-3, 50-21-5 (lactic acid); 133-37-9, 3715-17-1, 526-83-0, 526-94-3, 87-69-4 (tartaric acid); 126-44-3, 5949-29-1, 77-92-9, 8002-14-0 (citric acid); 90-64-2 (mandelic acid); 83-86-3 (phytic acid); 1406-18-4, 1406-70-8, 52225-20-4, 58-95-7, 59-02-9 (alpha tocopherol); 53-43-0 (prasterone)

SECTION HEADINGS:

013 Dermatology and Venereology  
030 Clinical and Experimental Pharmacology  
038 Adverse Reaction Titles  
037 Drug Literature Index

10/9/14 (Item 11 from file: 73)  
DIALOG(R)File 73:EMBASE  
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12014416 EMBASE No: 2003125330  
Introduction to Cosmetic Dermatology  
Bennett M.L.; Henderson Jr. R.L.; Jorizzo J.L.  
Dr. M.L. Bennett, Wake Forest University, Department of Dermatology,  
Winston-Salem, NC United States  
Current Problems in Dermatology ( CURR. PROBL. DERMATOL. ) (United States  
) 2003, 15/2 (35-83)  
CODEN: APDEB ISSN: 1040-0486  
DOCUMENT TYPE: Journal ; Review  
LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH  
NUMBER OF REFERENCES: 261

Cosmetic procedures are becoming increasingly popular with dermatologists. They are used to reverse the effects of aging, to improve the quality of the skin, to augment facial structures, and to improve the patient's appearance in general. They can also be beneficial for certain dermatoses. We present an introduction to cosmetic dermatologic procedures, focusing on chemical peels, **botulinum** toxin injections, and the use of filler substances. Following this review, the reader should have the basic knowledge to consider training to perform such procedures safely and effectively, even if he or she has not done so previously. Several agents are available for chemical peeling, each with unique properties for different therapeutic effects. Superficial peels penetrate the epidermis only and include alpha-hydroxy acids, salicylic acid, low-strength trichloroacetic acid (TCA), and Jessner's solution. These epidermal peels are used to treat mild photoaging and other epidermal dermatoses such as acne vulgaris and are generally performed with the use of a series of peels. Medium-depth peels, such as medium-strength TCA or combination peels that use a superficial and medium-depth agent, extend into the papillary dermis or upper reticular dermis. They can eradicate fine lines and wrinkles, improve color variation, eliminate some actinic keratoses, and correct textural irregularities. Higher-strength TCA and phenol induce deep wounding into the mid-to-deep reticular dermis. These deep peels can be used to help eradicate heavy wrinkles and lines due to chronic photodamage, but their use has largely been replaced by erbium and COSUB2 laser resurfacing. Histologic studies have shown that peeling agents help alter the structure and content of the skin, increase production of collagen and glycosaminoglycans, eliminate solar elastosis, and normalize epidermal atypia. Complications are largely related to infection, pigmentary alteration, delayed healing, and scarring, but appropriate patient screening and prophylaxis can minimize their incidence. \*\*\*Botulinum\*\*\* toxin injections are used in dermatology for two main purposes: elimination or attenuation of dynamic lines and wrinkles on the face and neck and elimination or attenuation of sweating in the case of hyperhidrosis of the hands, axillae, and/or feet. With an excellent safety profile and proven efficacy, these are popular procedures for patients. The medication is a **neurotoxin** that works by temporarily inhibiting the release of acetylcholine. The administering physician must be familiar with pertinent anatomy with respect to muscles of facial expression, appropriate doses, and injection sites, all of which are covered herein. In addition to being an effective treatment by itself, **botulinum** toxin injections can be combined with other procedures such as laser resurfacing, filler substance injections, facelifts, blepharoplasty, etc, to prolong and improve the results. Filler substances are injected in or below the skin in order to replace lost volume or to increase existing volume. They are frequently used for the nasolabial folds, lips, and perioral area, but they can also be used more extensively, as is the case in pan-facial structural lipoaugmentation. Fillers are occasionally used in nonfacial areas as well, such as in aging dorsal hands or other areas of atrophy. A number of filler

substances are available. The main classes of fillers are bovine collagen, human collagen, polysaccharide fillers, fat, synthetic fillers, and combination filler substances. Most filler substances are temporary in their effect, but some do persist in the skin forever. The treating physician must be familiar with proper selection, handling, location and depth of placement, longevity, costs, benefits, and risks of each substance that he or she uses. The necessary information is covered in this text. This text is intended to be a complete introduction to the above-mentioned cosmetic dermatology procedures. It includes aspects such as history and mechanism of action, but it really focuses on the clinical information necessary to be able to consider performing these procedures. It includes suppliers of products, precise descriptions of how to carry out the procedures, and clinical pearls to help achieve successful outcomes.

BRAND NAME/MANUFACTURER NAME: blue peel/obagi medical products/United States; silvadene/Hoechst Marion Roussel/France; mederma/Merz/United States; vigilon/Bard/United States; duoderm/Convatec/United States; elamax/ferndall/United States; hibiclens/Zeneca/United States; aquaphor/beiersdorf jobst/United States; vaseline/Chesebrough/United States; myobloc/Elan/United States; dysport/Speywood/United States; iopadine/Alcon/United States; naphcon a/Alcon/United States; vasocon a/Ciba Vision/United States; opcon a/Bausch and Lomb/United States; aspirin; **botox**

MANUFACTURER NAMES: obagi medical products/United States; Hoechst Marion Roussel/France; Merz/United States; Bard/United States; Convatec/United States; ferndall/United States; Astra Zeneca/United States; Zeneca/United States; beiersdorf jobst/United States; Chesebrough/United States; Elan/United States; Speywood/United States; Alcon/United States; Ciba Vision/United States; Bausch and Lomb/United States

DEVICE BRAND NAME/MANUFACTURER NAME: AlloDerm/Lifecell/United States; Artecoll/Rofil/Netherlands; Cymetra/obagi/United States; Dermalogen/Collagenesis/United States; Fascian/fascia biosystems/United States; Gore-Tex/Gore/United States; Hylan B/Biomatrix/United States; Restylane/Q Med/Sweden; SoftForm/Kinamed/United States; Zyderm I/McGhan/United States; Zyderm II/McGhan/United States; Zypplast/McGhan/United States; Hylaform/Biomatrix/United States

DEVICE MANUFACTURER NAMES: Lifecell/United States; Rofil/Netherlands; obagi/United States; Collagenesis/United States; fascia biosystems/United States; Gore/United States; Biomatrix/United States; Q Med/Sweden; Kinamed/United States; McGhan/United States

#### DRUG DESCRIPTORS:

\*dermatological agent--adverse drug reaction--ae; \*dermatological agent--drug combination--cb; \*dermatological agent--drug therapy--dt; \*dermatological agent--pharmacology--pd; \***botulinum** toxin--adverse drug reaction--ae; \***botulinum** toxin--drug therapy--dt; \***botulinum** toxin--pharmacology--pd; \***botulinum** toxin--intramuscular drug administration--im; \*filler  
2 hydroxyacid--adverse drug reaction--ae; 2 hydroxyacid--drug therapy--dt; 2 hydroxyacid--pharmacology--pd; salicylic acid--adverse drug reaction--ae; salicylic acid--drug therapy--dt; salicylic acid--pharmacology--pd; trichloroacetic acid--adverse drug reaction--ae; trichloroacetic acid--drug combination--cb; trichloroacetic acid--drug therapy--dt; trichloroacetic acid--pharmacology--pd; phenol--adverse drug reaction--ae; phenol--drug therapy--dt; phenol--pharmacology--pd; collagen--endogenous compound--ec; glycosaminoglycan--endogenous compound--ec; erbium; carbon dioxide; acetylcholine--endogenous compound--ec; antiviral agent--drug therapy--dt; antiviral agent--oral drug administration--po; sulfadiazine silver--drug therapy--dt; glycolic acid--drug combination--cb; glycolic acid--drug therapy--dt; glycolic acid--pharmacology--pd; corticosteroid--drug therapy--dt; corticosteroid--intralesional drug administration--il; corticosteroid--topical drug administration--tp; acetylsalicylic acid--drug therapy--dt; macrogol--drug therapy--dt; duoderm--drug therapy--dt; silicone gel--drug therapy--dt; fluorouracil--drug combination--cb; fluorouracil--drug therapy--dt; fluorouracil--pharmacology--pd; sunscreen; retinoid; hydroquinone;

aciclovir; famciclovir; valaciclovir; unindexed drug; unclassified drug;  
chlorhexidine gluconate; xipamide; petrolatum; **botulinum** toxin B;  
**botulinum** toxin A; naphazoline

MEDICAL DESCRIPTORS:

\*cosmetic industry

aging; skin abrasion; dermoepidermal junction; skin disease--drug therapy  
--dt; skin color; actinic keratosis--drug therapy--dt; histology; skin  
structure; elastosis--drug therapy--dt; tissue repair; scar formation--drug  
therapy--dt; scar formation--side effect--si; side effect--side effect--si;  
skin infection--side effect--si; skin pigmentation; hyperhidrosis--drug  
therapy--dt; drug safety; drug efficacy; facial expression; injection site;  
eyelid reconstruction; risk benefit analysis; cost; treatment outcome; drug  
mechanism; drug contraindication; telangiectasia--side effect--si; erythema  
--side effect--si; contact dermatitis--side effect--si; drug toxicity--side  
effect--si; flushing; herpes simplex--drug therapy--dt; herpes simplex  
--side effect--si; pruritus--side effect--si; **hyperpigmentation**--side  
effect--si; ectropion--side effect--si; chloasma--drug therapy--dt; lentigo  
--drug therapy--dt; ecchymosis--side effect--si; edema--side effect--si;  
headache--side effect--si; rash--side effect--si; ptosis--drug therapy--dt;  
ptosis--side effect--si; diplopia--side effect--si; retrobulbar hemorrhage  
--side effect--si; entropion--side effect--si; keratitis--side effect--si;  
dose response; rhytidoplasty; human; nonhuman; review

DRUG TERMS (UNCONTROLLED): chemical peeling agent--adverse drug reaction  
--ae; chemical peeling agent--drug combination--cb; chemical peeling agent  
--drug therapy--dt; chemical peeling agent--pharmacology--pd; Jessner  
solution--adverse drug reaction--ae; Jessner solution--drug combination--cb  
; Jessner solution--drug therapy--dt; Jessner solution--pharmacology--pd;  
blue peel; mederma; elamax; iopadine; vasocon a; opcon a

CAS REGISTRY NO.: 63-36-5, 69-72-7 (salicylic acid); 14357-05-2, 76-03-9 (  
trichloroacetic acid); 108-95-2, 3229-70-7 (phenol); 9007-34-5 (  
collagen); 7440-52-0 (erbium); 124-38-9, 58561-67-4 (carbon dioxide);  
51-84-3, 60-31-1, 66-23-9 (acetylcholine); 22199-08-2 (sulfadiazine  
silver); 79-14-1 (glycolic acid); 493-53-8, 50-78-2, 53663-74-4,  
53664-49-6, 63781-77-1 (acetylsalicylic acid); 25322-68-3 (macrogol);  
51-21-8 (fluorouracil); 123-31-9 (hydroquinone); 59277-89-3 (aciclovir)  
; 104227-87-4 (famciclovir); 124832-26-4 (valaciclovir); 18472-51-0 (  
chlorhexidine gluconate); 14293-44-8 (xipamide); 8009-03-8 (petrolatum)  
; 93384-43-1 (**botulinum** toxin A); 5144-52-5, 550-99-2, 835-31-4 (  
naphazoline); 60747-34-4 (vasocon a

SECTION HEADINGS:

- 013 Dermatology and Venereology
- 027 Biophysics, Bioengineering and Medical Instrumentation
- 036 Health Policy, Economics and Management
- 037 Drug Literature Index
- 038 Adverse Reaction Titles

10/9/15 (Item 12 from file: 73)

DIALOG(R)File 73:EMBASE

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11981643 EMBASE No: 2003092629

Update on non-ablative light therapy for rejuvenation: A review  
Sadick N.S.

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AUTHOR EMAIL: nssderm@sadickdermatology.com

Lasers in Surgery and Medicine ( LASERS SURG. MED. ) (United States)

2003, 32/2 (120-128)

CODEN: LSMED ISSN: 0196-8092

DOCUMENT TYPE: Journal ; Review

LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH

NUMBER OF REFERENCES: 33

Background and Objectives: Non-ablative technologies are playing an increasing role in the management of photoaging. Newer radiofrequency technologies have added to this therapeutic armamentarium. Shorter wavelength technologies are more effective in targeting pilosebaceous vascular and pigmentary alterations while longer wavelength technologies are most effective in wrinkle reduction mediated through dermal remodeling. An overview of the various technologies available to the practicing laser surgeon are outlined in the present review. (c) 2003 Wiley-Liss, Inc.  
DEVICE BRAND NAME/MANUFACTURER NAME: VascuLight/Lumenis/United States; Medlite IV/Continuum/United States; Thermage; IPL Quantum SR; Cool Touch I; Cool Touch II  
DEVICE MANUFACTURER NAMES: Lumenis/United States; Continuum/United States  
DRUG DESCRIPTORS:

\***botulinum** toxin A; \***botulinum** toxin B

MEDICAL DESCRIPTORS:

\*aging; \*rejuvenation; \*light; \*radiofrequency; \*laser  
skin; vascular disease--surgery--su; vascular disease--therapy--th;  
telangiectasia--surgery--su; telangiectasia--therapy--th;  
**hyperpigmentation**--surgery--su; **hyperpigmentation**--therapy--th;  
senescence; treatment indication; neodymium laser; pulsed dye laser; diode laser; carbon dioxide laser; erbium YAG laser; ultrasound; human; clinical article; clinical trial; multicenter study; adult; review; priority journal  
MEDICAL TERMS (UNCONTROLLED): intense pulsed light; photorejuvenation  
CAS REGISTRY NO.: 93384-43-1 ( \*\*\*botulinum\*\*\* toxin A)

SECTION HEADINGS:

- 009 Surgery
- 013 Dermatology and Venereology
- 027 Biophysics, Bioengineering and Medical Instrumentation
- 037 Drug Literature Index

10/9/16 (Item 13 from file: 73)

DIALOG(R)File 73:EMBASE

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11627841 EMBASE No: 2002199981

Eccrine naevus: Case report and literature review [12]

Rodriguez Vazquez M.; Gomez de la Fuente E.; Alvarez Fernandez J.G.;  
Vicente Martin F.J.; Lopez Esteban J.L.; Pinedo Moraleda F.

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Acta Dermato-Venereologica ( ACTA DERM.-VENEREOL. ) (Norway) 2002, 82/2 (154-156)

CODEN: ADVEA ISSN: 0001-5555

DOCUMENT TYPE: Journal ; Letter

LANGUAGE: ENGLISH

NUMBER OF REFERENCES: 17

BRAND NAME/MANUFACTURER NAME: **botox**/Allergan/United States

MANUFACTURER NAMES: Allergan/United States

DRUG DESCRIPTORS:

\***botulinum** toxin A--drug therapy--dt  
aluminum chloride--drug therapy--dt

MEDICAL DESCRIPTORS:

\*nevus--diagnosis--di; \*nevus--drug therapy--dt; \*sweat gland tumor  
--diagnosis--di; \*sweat gland tumor--drug therapy--dt  
clinical feature; symptom; hyperhidrosis; risk factor; toxic oil syndrome;  
anamnesis; **hyperpigmentation**; skin biopsy; treatment failure; medical  
literature; human; male; female; case report; adolescent; aged; infant;  
school child; adult; letter; priority journal  
CAS REGISTRY NO.: 93384-43-1 ( \*\*\*botulinum\*\*\* toxin A); 7446-70-0,  
7784-13-6 (aluminum chloride)

SECTION HEADINGS:

013 Dermatology and Venereology  
037 Drug Literature Index

10/9/17 (Item 14 from file: 73)  
DIALOG(R)File 73:EMBASE  
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11345494 EMBASE No: 2001359834  
Educating the cosmetic patient  
Draelos Z.D.  
Dr. Z.D. Draelos, Department of Dermatology, Wake Forest University,  
School of Medicine, Winston-Salem, NC United States  
Dermatologic Therapy ( DERMATOL. THER. ) (United States) 2001, 14/3  
(178-180)  
CODEN: DETHF ISSN: 1396-0296  
DOCUMENT TYPE: Journal ; Short Survey  
LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH

Educating the cosmetic patient is an important task, no less important than educating the patient with a dermatologic disease. However, the cosmetic patient is much more difficult to educate, since there are many treatment options, all of which are elective. Furthermore, the patient will only be satisfied with a result that meets their expectations, which may or may not be realistic. A skin cancer patient is generally satisfied knowing that the margins of the tumor are clear and the chances for recurrence are minimal. Even though a scar is left at the removal site, patients are less demanding about the cosmetic outcome. This is not the case with elective cosmetic procedures. The patient perceives that they had nothing wrong to start with and if the outcome is less than expected the failure is much more dramatic. This means that cosmetic patients must be educated with great care and understanding. The best educated patient will be the most satisfied patient in many cases.

DRUG DESCRIPTORS:

trichloroacetic acid; glycolic acid; **botulinum** toxin

MEDICAL DESCRIPTORS:

\*esthetic surgery  
rejuvenation; healing; **hyperpigmentation**; skin care; hypertrophic scar; keloid; patient compliance; short survey  
CAS REGISTRY NO.: 14357-05-2, 76-03-9 (trichloroacetic acid); 79-14-1 (glycolic acid)

SECTION HEADINGS:

013 Dermatology and Venereology

10/9/18 (Item 15 from file: 73)  
DIALOG(R)File 73:EMBASE  
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11061049 EMBASE No: 2001077178  
The aging face and skin: Common signs and treatment  
Fusco F.J.  
Dr. F.J. Fusco, 145 East 32nd Street, New York, NY 10016 United States  
Clinics in Plastic Surgery ( CLIN. PLAST. SURG. ) (United States) 2001, 28/1 (1-12)  
CODEN: CPSUD ISSN: 0094-1298  
DOCUMENT TYPE: Journal ; Review  
LANGUAGE: ENGLISH SUMMARY LANGUAGE: ENGLISH  
NUMBER OF REFERENCES: 43

In this article, the most common cutaneous manifestations of photodamage



and chronological aging, with the exception of invasive malignancies, are reviewed. Current nonsurgical approaches to the amelioration of the manifestations are discussed, including application of various topical preparations, noninvasive physical and chemical procedures for removal of proliferative lesions, and the options for soft-tissue augmentation.

BRAND NAME/MANUFACTURER NAME: melanex; eldoquin forte; lustra; retin a; renova; avita; **botox**

DEVICE BRAND NAME/MANUFACTURER NAME: zyplast; isolagen; dermalogen; alloderm; artecol

DRUG DESCRIPTORS:

hydroquinone--drug therapy--dt; hydroquinone--topical drug administration--tp; metahexamide--drug therapy--dt; metahexamide--topical drug administration--tp; sertraline--drug therapy--dt; sertraline--topical drug administration--tp; retinoic acid--drug combination--cb; retinoic acid--drug therapy--dt; retinoic acid--topical drug administration--tp; retinol--drug therapy--dt; retinol--topical drug administration--tp; antioxidant--drug therapy--dt; antioxidant--topical drug administration--tp; alpha tocopherol--drug therapy--dt; alpha tocopherol--topical drug administration--tp; ascorbic acid--drug therapy--dt; ascorbic acid--topical drug administration--tp; 2 hydroxyacid--drug therapy--dt; 2 hydroxyacid--topical drug administration--tp; azelaic acid--drug therapy--dt; azelaic acid--topical drug administration--tp; liquid nitrogen; fluorouracil--drug combination--cb; fluorouracil--drug therapy--dt; fluorouracil--topical drug administration--tp; trichloroacetic acid--drug therapy--dt; trichloroacetic acid--topical drug administration--tp; hyaluronic acid; collagen implant; politef; **botulinum** toxin A

MEDICAL DESCRIPTORS:

\*aging; \***hyperpigmentation**--drug therapy--dt; \***hyperpigmentation**--therapy--th; \*lentigo--drug therapy--dt; \*lentigo--surgery--su; \*lentigo--therapy--th  
sun exposure; cutaneous parameters; light damage; plastic surgery; cryosurgery; skin abrasion; YAG laser; poikiloderma--drug therapy--dt; poikiloderma--surgery--su; poikiloderma--therapy--th; actinic keratosis--drug therapy--dt; actinic keratosis--surgery--su; actinic keratosis--therapy--th; cheilitis--drug therapy--dt; cheilitis--surgery--su; cheilitis--therapy--th; telangiectasia--drug therapy--dt; telangiectasia--surgery--su; comedo; xerosis--drug therapy--dt; seborrheic keratosis--drug therapy--dt; seborrheic keratosis--surgery--su; seborrheic keratosis--therapy--th; syringoma--surgery--su; human; review

DRUG TERMS (UNCONTROLLED): eldoquin forte; lustra

CAS REGISTRY NO.: 123-31-9 (hydroquinone); 565-33-3 (metahexamide); 79617-96-2 (sertraline); 302-79-4 (retinoic acid); 68-26-8, 82445-97-4 (retinol); 1406-18-4, 1406-70-8, 52225-20-4, 58-95-7, 59-02-9 (alpha tocopherol); 134-03-2, 15421-15-5, 50-81-7 (ascorbic acid); 123-99-9 (azelaic acid); 51-21-8 (fluorouracil); 14357-05-2, 76-03-9 (trichloroacetic acid); 31799-91-4, 9004-61-9, 9067-32-7 (hyaluronic acid); 9002-84-0, 9039-02-5 (politef); 93384-43-1 (**botulinum** toxin A)

SECTION HEADINGS:

- 013 Dermatology and Venereology
- 027 Biophysics, Bioengineering and Medical Instrumentation
- 037 Drug Literature Index

10/9/21 (Item 2 from file: 149)  
DIALOG(R)File 149:TGG Health&Wellness DB(SM)  
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02158172 SUPPLIER NUMBER: 98543560 (THIS IS THE FULL TEXT)  
Face the future: when modern science and ingenuity converge--**Botox** creams, anyone?--the result is skin care that targets every problem, from some very new angles. (Beauty Flash).

Larkworthy, Jane; Reynoso, Patricia; Devkota, Dahlia  
W, 32, 3, 246(3)  
March,  
2003

PUBLICATION FORMAT: Magazine/Journal ISSN: 0162-9115 LANGUAGE: English  
RECORD TYPE: Fulltext TARGET AUDIENCE: Consumer  
WORD COUNT: 2189 LINE COUNT: 00179

TEXT:

Thought you'd heard it all when it came to skin care solutions? Think again. Just when it seemed that the beauty industry had exhausted every possible recipe for achieving a more youthful complexion, along comes a new crop of highly innovative (if mind-bogglingly complicated) treatments. So get to know your adenosine triphosphates and kojic acids--they may just be a girl's best friend.

**BOTOX LITE**

Long before the FDA approved **Botox**--the expression-halting substance that has been injected into millions of frowns, furrows and crow's-feet--for cosmetic purposes last April, skin care laboratories were quietly toiling away, hoping to capture the syringe's magic in cream form. Several creams have recently been introduced with formulas that would make a chemistry major dizzy. But before you scream "Snake oil!" let's not forget the skepticism with which **Botox** was initially received--and the fact that last year alone, half a million people braved the needle, a 67 percent increase from 2001.

First out of the gate is Doctor's Dermatologic Formula (DDF), with goals so similar to **Botox** that the product was cleverly named Faux-Tox. However, the brass at Allergan Inc., **\*\*\*Botox\*\*\***'s manufacturer, were not amused, and the name was subsequently changed to Wrinkle Relax. The cream is designed to minimize facial contractions using naturally derived amino acids to block nerve impulses that initiate contractions. The line's founder, Howard Sobel, M.D., stresses that this cream doesn't replicate **Botox**'s immediate effects--to do so, it would have to be injected directly into the muscle--but adds that unlike **botulinum** toxin, these formulas are nontoxic, easing that common worry among users.

Even the big guns have jumped on the **Botox** bandwagon: Lancome with Resolution D-Contraxol Intensive Anti-Wrinkle Treatment and Helena Rubinstein with Expressionist. Both products are positioned as noninvasive treatments to target "dermocreasing"--Lancome's catchy term for the lines and wrinkles that develop over the years when faces do what they do.

For the scientists at Lancome, it was the discovery of actin and myosin that begat Resolution. These fibers are found within the skin's collagen- and elastin-producing cell, the fibroblast. "We discovered the inner workings of the fibroblast," explains Alan J. Meyers, vice president of central research for L'Oreal USA, "and we learned that as we age, these fibers become as tight as a fist, therefore not allowing the fibroblast to return to its original shape." Armed with this information, the team formulated Resolution with D-Contraxol, a mineral complex that the company daims relaxes the actin and myosin and, in turn, the skin itself, making it less apt to tense up into a wrinkle or line.

Arguing that facial muscles contract more when calcium is present within fibroblasts, Helena Rubinstein has used a combination of minerals and amino acids in Expressionist to encourage calcium absorption, thereby slowing down and softening excess muscle movement.

Rubinstein's assistant vice president of research and development, Maria Ulrich, stresses that this product won't replace **Botox** injections since it is intended not to eliminate deep wrinkles, but to stop them from forming at the first signs of expression lines. DDF's Sobel adds, "These creams are helpful for people averse to needles or for those who want to perpetuate the effects of the injections."

**ENERGY CRISIS**

Somewhere between the tidy boundaries that define traditional skin care categories (normal, dry, oily) lurks an increasingly relevant new

classification, one that can be attributed to modern-day living. Some experts refer to it as "energy-deprived" skin, while others simply call it "fatigued."

"With Repairwear, we figured out how to build protection by building energy" says Ken Marenus, Ph.D., vice president of biological research for Clinique. According to Marenus, Repairwear works via its Vital Fuel Complex, made up of a medley of plant and marine extracts that he says replicates AIP's energizing powers. Also, he adds, using Repairwear at night, while the body is in a restful state, optimizes the results. (See "Rest Assured," below, for more on sleep and the skin)

New skin tools are targeting this energy depletion--which is brought on by today's abundant stress, pollution and UV exposure, resulting in sallowness, dullness and sagging--in different ways. Some, like Clinique's Repairwear family of products (a night cream, lotion and Extra Help Serum), aim to get to the root of the problem by replenishing the skin's levels of ATP (adenosine triphosphate), which is responsible for cells' energy-making capabilities.

The researchers behind the French spa line Sothys likewise believe in the importance of boosting ATP production; their mission is to help the skin cells better utilize the body's internal oxygen supply and, yes, produce ATP. According to Charles Mizelle, director of regional operations for Sothys, the marine ingredients in the Sothys Oxyliance collection--a mask, serum, cream and lotion--are proven to increase cellular oxygen levels. "This system is like a cardio workout for the skin cells," he says. "It will boost metabolism and expel toxins, all resulting in an energized skin." He adds that it is ideal for "city skin, smokers' skin and asphyxiated skin"

Indeed, short of never leaving the house (or never losing your cool), these peppy skin care offerings might deliver the best protection against the damages of daily life.

#### A FLUSH WITH GREATNESS

For some women, a radiant complexion is attainable only on a few fleeting occasions: during pregnancy, for example, or just after a workout. But rosy cheeks, clarity and balanced skin tone are universal goals.

"Without question, one of the most common requests we get is to get the glow back," says Soren M. White, M.D., clinical director of New York's SkinKlinic. "Loss of radiance can be filed into two categories: intrinsic aging, which simply happens to skin over time; the other is sun exposure, which is responsible for extrinsic aging. There's an overlap between the two in that sun exposure speeds up collagen loss and the breaking down of elastin fibers, not to mention the increased pigmentation of skin."

While White recommends in-clinic treatments such as glycolic peels or laser resurfacing, skin care companies are constantly whipping up recipes to get the glow back at home. Theorizing that slow blood circulation beneath skin's surface is to blame, Chanel created Radiance Revealing Serum with a plant-based complex that mimics the action of a protein responsible for jump-starting said blood flow. Researchers at Olay blame dullness on slow turnover of surface skin cells, so its new Regenerist, with an Amino-Peptide Complex that is full of vitamins and green tea extract, strengthens skin's outer layer and increases cell turnover. And Estee Lauder uses a highly secretive BioSync Complex that encourages collagen and elastin production to bring about a smoother texture while its lipid complex pumps up the radiance factor.

Meanwhile, Biotherm aims for that coveted luminosity with its new Pure Bright collection, including Illuminating Essence, a serum containing kojic acid, which suppresses melanin production. Excess melanin is the main culprit behind uneven skin tone, dark spots and \*\*\*freckles\*\*\*. Additionally, tiny mica mineral crystals in the serum help give a balanced glow.

The clear-as-crystal concept is also in Re Vive's Intensite, in which micas are coated with an ultrafine acrylic for that soft-focus effect along with an insulin-like growth factor that helps strengthen skin's structure. Lierac's Sequential goes for the glow by packing its recipes with

hyaluronic acid and vitamins A, C and E, along with--deep breath--copper, calcium, magnesium and zinc. Not to mention a patented delivery system that carries the ingredients in a molecule form to penetrate deeper into skin. The result? Faster collagen production. And while the hormone DHEA has been used in skin care for its anti-aging properties, Yves Saint Laurent uses a plant component, Ganoderma, in its Age Defying Creme to mimic DHEA in keeping sebaceous glands active in skin that becomes drier with age. Straddling the line between skin care and makeup is La Prairie's new Cellular Treatment Rose Illusion, a prefoundation prep that temporarily smoothes over lines and wrinkles, with additional optical diffusers to soften skin 's appearance.

But perhaps the most intriguing radiance activator is from Guerlain. Running with the joyful fact that chocolate causes the brain to produce endorphins, which prompt good feelings, Guerlain has recently discovered that endorphins also boost skin cell activity. The Paris-based company is hoping to mimic that effect in its new Happylogy Glowing Skin Treatment. The magic comes from a Pro-Endorphin Complex that, along with antioxidants, contains--you guessed it--a cocoa extract known to help boost endorphin production.

#### ADVANCED CHEMISTRY

Science is the gift that keeps on giving. These latest discoveries are set to influence the product formulations of the future.

Spin Traps: This new category of antioxidants is likely to steal the show in the next few years. Free radicals are incomplete atoms that prey on healthy cells for their missing link, thus blazing a warpath of destruction (showing up as aging skin). While most antioxidants work by neutralizing free radicals, a spin trap actually traps them and reforms them to do good. Once a free radical is spin-trapped, it's preserved, charged with energy and dumped back into the respiratory cycle, where it helps to build up the body's natural defenses.

In October, at the American Academy of Dermatology annual meeting, dermatologist Patricia Farris of Tulane University School of Medicine stated that spin traps are on the cutting edge of skin care. Even dermatologist Nicholas Perricone praises spin traps' anti-inflammatory properties (his translation: fewer wrinkles) in his wildly successful book, The Wrinkle Cure. Many professionals are still skeptical and await more proof of the ingredients' efficacy but Lynn Ross, president of Institut' DerMed, a cosmeceutical line that contains spin traps, is already convinced. "We have new information and ingredients at our disposal, so we should use it," she says. "I'm not going to let myself age like my grandmother."

Chiral Technology: First discovered by Louis Pasteur more than a century ago, chiral technology is the separation of a single molecule into two halves--right and left, like a pair of hands. (The Greek word for hand is chir, hence the name chiral) Chirally correcting a molecule involves removing the half with negative properties, leaving only the positive half. The FDA recently mandated that, when possible, all new pharmaceuticals be chirally correct, in an effort to decrease side effects. (Some existing drugs aren't chirally correct: Ibuprofen, for example, contains isomeric molecules that ease body pain, but many people experience nausea because of its negative side.)

Only recently has chiral technology been incorporated in skin care. "Applying this concept to skin care makes sense," says Michael Wolfgeher, president of Circuit Cosmeceuticals, a new line of chirally correct skin care products based in California. Wolfgeher argues that a product with chirally correct molecules is more potent than one that isn't. "More targeted benefits are achieved so you can really utilize the ingredients," he says. "Once you understand that this is the way the world is going to be working eventually--with food, with drugs--it just makes common sense."

#### REST ASSURED

Yes, there really is such a thing as beauty sleep--and as skin care companies learn more about its benefits, they're introducing a slew of new nighttime formulations.

"At night, your skin isn't sleeping, it's repairing," says Clinique's Marenus. Inspired by new research linking plentiful sleep to improved skin quality, the company's Repairwear collection was specifically designed to energize skin during the night's rest. According to Marenus, nighttime is when the skin takes a virtual deep breath, addressing the day's damage and arming itself for the next morning. Think of sleep as a hyperefficient housekeeper, cleaning supplies in hand, who shows up to tidy everything with nary a complaint.

Another skin care company ready to heat up the night is Clarins, with its Line Prevention Multi-Active Night Cream. Working on the premise that at night the skin experiences a decrease in cortisol hormone, the new product aims to boost levels with a botanical equivalent that includes English oak root, a skin smoother with a built-in free radical defense mechanism. "As cortisol levels lower, your skin becomes more susceptible to inflammation and irritation," explains Caroline Pieper-Vogt, vice president of marketing at Clams. At night, the skin also experiences extreme water loss, which Line Prevention also addresses.

"The skin cells must be saturated with the relief substances they need to breathe freely, rebuild their stocks, recover and renew," adds Pieper-Vogt. All while you're fast asleep.

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Dermatologic Surgeons Restore Youth to the Aging Face.

Franz, Rachel  
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To maintain a healthy, youthful appearance, dermatologic surgeons often start their patients on a skin-care regimen to treat the milder symptoms of aging. In subsequent decades, they progressively choose from their treatment repertoire to correct the deeper, more advanced signs of the aging face. Here's what to watch for:

The 20s. While most people enjoy beautiful skin throughout their 20s, fine lines, \*\*\*freckles\*\*\*, and other cosmetic flaws may begin to appear. Prescription creams and lotions, light chemical peels, and certain resurfacing techniques like microdermabrasion can stave off these blemishes, while setting the stage for a youthful look in the years ahead.

The 30s. Wrinkles, brown spots, broken veins, some thinning here, some thickening there -- this is typically the decade when the aging process gradually begins to show. Soft-tissue fillers, \*\*\*botulinum\*\*\* toxin therapy, chemical peels, and laser treatments are some popular procedures to repair damage to the skin's top layers and underpinnings.

The 40s. Once the beginning of the end, this decade is now considered the peak of physical and personal confidence. While excess hair, stubborn fat deposits, wrinkles and creases, sagging jowls or baggy eyelids will undoubtedly appear, they can be erased by more intensive applications of many of the same treatments, along with additional procedures like liposuction using local anesthesia, laser resurfacing, laser hair removal, blepharoplasty, and dermabrasion.

The 50s and beyond. Yes, it is possible to have smooth, luminous skin in these years, especially for people who have enjoyed early intervention in the preceding decades. Thanks to the effectiveness of today's arsenal of

skin rejuvenation procedures, even deep-set lines and wrinkles, the accumulation of pigmentation changes, loose skin, and fat loss can be dramatically improved and recontoured. Often, a combination of treatment options is recommended to enhance elderly skin.

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Dermatology Nursing News is a regular feature in Dermatology Nursing. Please send news on professional issues, dermatology issues, professional meetings, and other items of interest to Rachel Franz News Editor, c/o Dermatology Nursing; East Holly Avenue Box 56, Pitman, NJ 08071-0056; Fax (856)589-7463.

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? ds

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The aging face and skin: Common signs and treatment

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In this article, the most common cutaneous manifestations of photodamage and chronological aging, with the exception of invasive malignancies, are reviewed. Current nonsurgical approaches to the amelioration of the manifestations are discussed, including application of various topical preparations, noninvasive physical and chemical procedures for removal of proliferative lesions, and the options for soft-tissue augmentation.

BRAND NAME/MANUFACTURER NAME: melanex; eldoquin forte; lustra; retin a;

renova; avita; **botox**

DEVICE BRAND NAME/MANUFACTURER NAME: zyplast; isolagen; dermalogen;

alloderm; artecol

DRUG DESCRIPTORS:

hydroquinone--drug therapy--dt; hydroquinone--topical drug administration--tp; metahexamide--drug therapy--dt; metahexamide--topical drug administration--tp; sertraline--drug therapy--dt; sertraline--topical drug administration--tp; retinoic acid--drug combination--cb; retinoic acid--drug therapy--dt; retinoic acid--topical drug administration--tp; retinol--drug therapy--dt; retinol--topical drug administration--tp; antioxidant--drug therapy--dt; antioxidant--topical drug administration--tp; alpha tocopherol--drug therapy--dt; alpha tocopherol--topical drug administration--tp; ascorbic acid--drug therapy--dt; ascorbic acid--topical drug administration--tp; 2 hydroxyacid--drug therapy--dt; 2 hydroxyacid--topical drug administration--tp; azelaic acid--drug therapy--dt; azelaic acid--topical drug administration--tp; liquid nitrogen; fluorouracil--drug combination--cb; fluorouracil--drug therapy--dt; fluorouracil--topical drug administration--tp; trichloroacetic acid--drug therapy--dt; trichloroacetic acid--topical drug administration--tp; hyaluronic acid; collagen implant; politef; **botulinum** toxin A

MEDICAL DESCRIPTORS:

\*aging; \***hyperpigmentation**--drug therapy--dt; \*

**hyperpigmentation**--therapy--th; \*lentigo--drug therapy--dt; \*lentigo

--surgery--su; \*lentigo--therapy--th

sun exposure; cutaneous parameters; light damage; plastic surgery

15286322 PMID: 15071127

Clinical practice. Treatment of photoaging.

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Lasers--therapeutic use--TU; **Lentigo**--therapy--TH; Middle Aged;  
Practice Guidelines; Skin--anatomy and histology--AH; Skin--pathology--PA;  
Skin Aging--pathology--PA; Sunscreening Agents--therapeutic use--TU;  
Telangiectasis--surgery--SU

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(Sunscreening Agents)

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Intense Pulsed Light(TM) and **Botulinum** Toxin Type A for the Aging Face

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Aged skin is the result of the combined processes of intrinsic aging and photoaging. Intrinsic aging is a cellular process that involves the accumulation of chronological genetic changes. Little is understood about how to combat intrinsic aging. Photoaging involves environmental effects, mainly damage from the sun, that can be reduced through a variety of interventions. Several options exist for improving the appearance of aging skin. We present information about the use of nonablative intense pulsed light technology in addition to **botulinum** toxin type A for eradication of the signs of photoaged skin. A structured clinical approach is outlined.

BRAND NAME/MANUFACTURER NAME: aspirin; **botox**; dysport; myobloc; neurobloc

DEVICE BRAND NAME/MANUFACTURER NAME: Intense Pulsed Light/Lumenis; Lumenis One/Lumenis; Vasculight/Lumenis; LightSheer

DEVICE MANUFACTURER NAMES: Lumenis

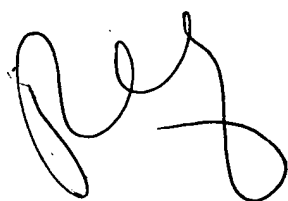
DRUG DESCRIPTORS:

\***botulinum** toxin A--adverse drug reaction--ae; \***botulinum** toxin

A--drug combination--cb; \***botulinum** toxin A--drug comparison--cm; \*

**botulinum** toxin A--drug interaction--it; \***botulinum** toxin A

--drug therapy--dt; \***botulinum** toxin A--pharmacology--pd

A handwritten signature in black ink, consisting of a stylized, cursive 'P' followed by a long horizontal stroke and a loop.

12579145 EMBASE No: 2004165970

Treatment of Photoaging

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NUMBER OF REFERENCES: 60

DEVICE BRAND NAME/MANUFACTURER NAME: Zyplast; Restylane

DRUG DESCRIPTORS:

sunscreen--adverse drug reaction--ae; sunscreen--clinical trial--ct;  
sunscreen--drug combination--cb; sunscreen--drug comparison--cm; sunscreen  
--drug therapy--dt; sunscreen--pharmacology--pd; sunscreen--topical drug  
administration--tp; hydroxyacid--adverse drug reaction--ae; hydroxyacid  
--clinical trial--ct; hydroxyacid--drug combination--cb; hydroxyacid--drug  
therapy--dt; hydroxyacid--pharmacoeconomics--pe; hydroxyacid--pharmacology  
--pd; hydroxyacid--topical drug administration--tp; retinoid--adverse drug  
reaction--ae; retinoid--clinical trial--ct; retinoid--drug combination--cb;  
retinoid--drug comparison--cm; retinoid--drug therapy--dt; retinoid  
--pharmacoeconomics--pe; retinoid--pharmacology--pd; retinoid--topical drug  
administration--tp; glycolic acid--clinical trial--ct; glycolic acid--drug  
therapy--dt; glycolic acid--pharmacology--pd; glycolic acid--topical drug  
administration--tp; lactic acid--clinical trial--ct; lactic acid--drug  
therapy--dt; lactic acid--pharmacology--pd; lactic acid--topical drug  
administration--tp; retinoic acid--drug therapy--dt; retinoic acid  
--pharmacology--pd; retinoic acid--topical drug administration--tp;  
tazarotene--drug therapy--dt; tazarotene--pharmacology--pd; tazarotene  
--topical drug administration--tp; emollient agent--clinical trial--ct;  
emollient agent--drug comparison--cm; emollient agent--drug therapy--dt;  
emollient agent--pharmacology--pd; retinol--drug therapy--dt; retinol  
--pharmacology--pd; retinol--topical drug administration--tp; retinal--drug  
therapy--dt; retinal--pharmacology--pd; retinal--topical drug  
administration--tp; fluorouracil--adverse drug reaction--ae; fluorouracil  
--drug comparison--cm; fluorouracil--drug therapy--dt; fluorouracil  
--pharmacology--pd; fluorouracil--topical drug administration--tp;  
aminolevulinic acid--drug comparison--cm; aminolevulinic acid--drug therapy  
--dt; aminolevulinic acid--pharmacology--pd; aminolevulinic acid--topical  
drug administration--tp; liquid nitrogen--drug therapy--dt; liquid nitrogen  
--pharmacology--pd; liquid nitrogen--topical drug administration--tp;  
diclofenac--adverse drug reaction--ae; diclofenac--drug comparison--cm;  
diclofenac--drug therapy--dt; diclofenac--pharmacology--pd; diclofenac  
--topical drug administration--tp; **botulinum** toxin--drug therapy--dt;  
**botulinum** toxin--pharmacology--pd; **botulinum** toxin A--drug  
therapy--dt; **botulinum** toxin A--pharmacology--pd; collagen

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Update on non-ablative light therapy for rejuvenation: A review  
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Background and Objectives: Non-ablative technologies are playing an increasing role in the management of photoaging. Newer radiofrequency technologies have added to this therapeutic armamentarium. Shorter wavelength technologies are more effective in targeting pilosebaceous vascular and pigmentary alterations while longer wavelength technologies are most effective in wrinkle reduction mediated through dermal remodeling. An overview of the various technologies available to the practicing laser surgeon are outlined in the present review. (c) 2003 Wiley-Liss, Inc.

DEVICE BRAND NAME/MANUFACTURER NAME: VascuLight/Lumenis/United States; Medlite IV/Continuum/United States; Thermage; IPL Quantum SR; Cool Touch I; Cool Touch II

DEVICE MANUFACTURER NAMES: Lumenis/United States; Continuum/United States

DRUG DESCRIPTORS:

**\*botulinum** toxin A; **\*botulinum** toxin B

MEDICAL DESCRIPTORS:

\*aging; \*rejuvenation; \*light; \*radiofrequency; \*laser

skin; vascular disease--surgery--su; vascular disease--therapy--th;

telangiectasia--surgery--su; telangiectasia--therapy--th;

**hyperpigmentation**--surgery--su; **hyperpigmentation**--therapy--th;

senescence; treatment indication; neodymium laser; pulsed dye laser; diode laser; carbon dioxide laser; erbium YAG laser; ultrasound; human; clinical article; clinical trial; multicenter study; adult; review; priority journal

MEDICAL TERMS (UNCONTROLLED): intense pulsed light; photorejuvenation

CAS REGISTRY NO.: 93384-43-1 ( \*\*\*botulinum\*\*\* toxin A)

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